

Form #App.R. 15-1

IN THE INDIANA [SUPREME COURT/ COURT OF APPEALS/TAX COURT]
CAUSE NO. _____

NAME, _____)
[Appellant/Petitioner/) [Appeal or petition] from the _____
Plaintiff/Defendant,]) _____ Court.
)
v.) Trial Court case no.: _____
)
NAME, _____)
[Appellee/Respondent/) The Honorable _____
Plaintiff/Defendant.]) _____, Judge.

APPELLANT'S CASE SUMMARY (Appearance)

Party Information

Party or parties that filed Notice of Appeal:
Name: _____ Tel. No.: _____ (Only if unrepresented by counsel)
Address: _____

Attorney or attorneys representing party filing notice of appeal:
Name: _____ Attorney # _____
Address: _____
Tel. No.: _____ Fax No.: _____ E-Mail: _____
Requesting service of orders and opinions of the Court by FAX: Yes ☐ 1 No ☐ 2

Trial Information

Date case commenced: _____
Date of Judgment/order: _____ (Attach copy of judgment or order appealed from
including findings and conclusions (civil) and sentencing order (criminal))
Check the appropriate line(s) to show the ruling being appealed:
☐ 3 Administrative ruling ☐ 4 Injunction ☐ 5 (Judgment notwithstanding the verdict)
☐ 6 declaratory judgment ☐ 7 Judgment (bench trial) ☐ 8 Judgment (probation revocation)
☐ 9 Directed verdict ☐ 10 Judgment (guilty plea) ☐ 11 Summary judgment
☐ 12 Dismissed ☐ 13 Judgment (jury verdict)
☐ 14 Other (specify) _____
Is this a final judgment as to all claims and all parties? ☐ 15 Yes ☐ 16 No
If no, state the basis on which the judgment/order is immediately appealable.
T.R. 54(B) ☐ 17 App.R. 14(A)(1-9) ☐ 18 App.R. 14(B) ☐ 19

Check the appropriate line(s) best describing the nature of the case:

- | | | |
|--|--|--|
| <input type="checkbox"/> 20 Attorney's fees | <input type="checkbox"/> 34 Education law | <input type="checkbox"/> 49 Professional malpractice |
| <input type="checkbox"/> 21 Child custody/support | <input type="checkbox"/> 35 Employment and labor | <input type="checkbox"/> 50 Real property rights |
| <input type="checkbox"/> 22 Civil rights | <input type="checkbox"/> 36 Environmental law | <input type="checkbox"/> 51 Sanctions |
| <input type="checkbox"/> 23 Construction law | <input type="checkbox"/> 37 Equitable distribution | <input type="checkbox"/> 52 Taxation |
| <input type="checkbox"/> 24 Contempt | <input type="checkbox"/> 38 Guardianship | <input type="checkbox"/> 53 Termination of parental rights |
| <input type="checkbox"/> 25 Contract law | <input type="checkbox"/> 39 Health care | <input type="checkbox"/> 54 Tort claims act |
| <input type="checkbox"/> 26 Corporate law | <input type="checkbox"/> 40 Insurance, auto | <input type="checkbox"/> 55 Unemployment compensation |
| <input type="checkbox"/> 27 Criminal law, Misdemeanor | <input type="checkbox"/> 41 Insurance, other | <input type="checkbox"/> 56 Unfair and deceptive practices |
| <input type="checkbox"/> 28 Criminal law, habitual felon | <input type="checkbox"/> 42 Intentional torts | <input type="checkbox"/> 57 Utilities |
| <input type="checkbox"/> 29 Criminal law, probation revocation | <input type="checkbox"/> 43 Juvenile | <input type="checkbox"/> 58 Wills, trusts, estates |
| <input type="checkbox"/> 30 Criminal law, post conviction relief | <input type="checkbox"/> 44 Landlord/tenant | <input type="checkbox"/> 59 Workers' compensation |
| Specify _____ | <input type="checkbox"/> 45 Municipal law | <input type="checkbox"/> 60 Wrongful death |
| <input type="checkbox"/> 31 Debtor/creditor rights | <input type="checkbox"/> 46 Negligence | <input type="checkbox"/> 61 Wrongful discharge |
| <input type="checkbox"/> 32 Dissolution of marriage | <input type="checkbox"/> 47 Paternity | <input type="checkbox"/> 62 Zoning/annexation |
| <input type="checkbox"/> 33 Driver's license revocation | <input type="checkbox"/> 48 Products liability | |
| <input type="checkbox"/> 63 Other _____ | | |

Synopsis of judgment and sentence, if applicable: _____

Record Information

Date notice of appeal filed _____ (Attach copy of notice of appeal)

Date clerk's record due to be assembled: _____

Transcript information:

Court reporter responsible for preparing transcript (Name, address, telephone number): _____

Transcript ordered: Yes ☐64 No ☐65 Payment arrangements made: Yes ☐66 No ☐67

If no, reason not ordered or made: _____

Est. Transcript length _____ pp.

Transcript due date: _____

Appeal Information

A short and plain statement of the anticipated issues on appeal: _____

errors) _____ (Attach copy of motion to correct errors)

Prior appeals in this case with cause number: _____

Related appeals with Cause Number (prior, pending, or potential):

Motion for oral argument will be filed: Yes ☐68 No ☐69 Undecided ☐70

Motion for pre-appeal conference will be filed: No ☐71 Yes ☐72

Purpose: Shorten record ☐73 Appellate ADR ☐74 Refine issues ☐75 Other ☐76

If civil case, was ADR used in the trial court? Yes ☐77 No ☐78

If criminal case, status of defendant: On bond ☐79 Incarcerated ☐80

Location: _____

I certify that this case ☐does ☐does not involve issues relating to child custody, child support, child visitation, paternity, termination of parental rights, CHINS, adoption, or any other issue entitled to priority by statute.

/s/ Attorney/or pro se litigant's signature

CERTIFICATE OF SERVICE

I hereby certify that the forgoing has been served upon the following counsel of record by first class United States Mail, postage prepaid, this _____ day of _____, 20____.
